Arkansas

20___-20___ Application for Registration of Commercial Fertilizers

Arkansas State Plant Board, P. O. Box 1069, Little Rock, AR 72203

In accordance with Regulation No. 2 of the Arkansas Fertilizer Law (Act 106 of 1951 as amended), you are hereby requested to register for sale or distribution in Arkansas the fertilizer brands listed below.

NOTE: The name of any commercial fertilizer or fertilizer material shall be considered as a distinct and separate brand when differing in any respect other than the grade or common name of a fertilizer material.

All Registrations expire June 30 of each year. PHONE FIRM NAME ZIP CITY STATE ADDRESS ***(Minimums listed) Guaranteed Analysis % ** S CI Co Cu Fe Мо Na Zn Ca Mg Mn % % Avail 1.0 0.02 0.05 0.1 0.05 0.1 0.05 1.0 0.5 0.1 .0005 .0005 *Complete Brand Name Nitrogen Phos. Acid Potash Sources ***Minimums (complete if applicable) **Sources (complete if applicable) *For "Specialty Fertilizer" attach a complete label Number of Brands x \$25.00 = _____ 6. 1. Ammonium Nitrate 7. 2. Nitrogen Solutions TOTAL FEE ENCLOSED \$_____ 3. Urea 8. 13. 14. 9. 4. Triple Superphosphate Please make checks payable to: Arkansas State Plant Board 15. 5. Muriate of Potash 10. We hereby certify the above descriptions and attachments are true and correct. Registration No. Do not write in this space Approved for fiscal year ending June 30, 200___ Print Name & Title: Approved by: Jamey Johnson, Director Division of Feed & Fertilizer Date: Signature: Signature Date Approved Page of

FIRM NAME

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	%	% Avail	%		Ca	Mg	S	В	CI	Co	Cu	Fe	Mn	Мо	Na	Zn
Complete Brand Name	Nitrogen	Phos. Acid	Potash	Sources	1.0	0.5	1.0	0.02	0.1	.0005	0.05	0.1	0.05	.0005	0.1	0.05
																
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If you maintain a fertilizer blending and/or bulk storag with the complete mailing address of each facility.	ge facility in the state of Arkansas, complete this form, listing each location
If you do not have a bulk facility in Arkansas, enter N/A	and return with your registration application.
□ Check here if facility application should be mailed to	o each individual location.
ARKANSAS FACILITY LOCATION	COMPLETE MAILING ADDRESS
☐ Check here if facility application should be sent belo	w.
Firm Name	Phone
Attention	
Address	

_*Zip* _

City & State